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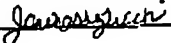
October 27, 2004

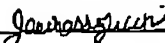
**RECEIVED
CENTRAL FAX CENTER****OCT 27 2004****GROUP: 1635****FAX NUMBER: 1-703-872-9306****ATTORNEY DOCKET NO.: RTS-0139****SERIAL NO.: 10/035,485****FILED: October 17, 2001****CUSTOMER NO.: 32862****CONFIRMATION NO.: 5056****NUMBER OF PAGES: 10**
(including this sheet)**MESSAGE:** Attached is an Amendment Transmittal Letter (in duplicate)
and Amendment in response to Office Action dated July 28, 2004.**URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!**

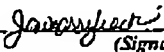
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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. RTS-0139	
Applicant(s): Baker and Cowser						
Application No. 10/035,485	Filing Date October 17, 2001	Examiner Janet L. Epps Ford	Customer No. 32862	Group Art Unit 1614	Confirmation No. 5056	
Invention: ANTISENSE MODULATION OF MATRIX METALLOPROTEINASE 1 EXPRESSION						
COMMISSIONER FOR PATENTS:				RECEIVED CENTRAL FAX CENTER		
Transmitted herewith is an amendment in the above-identified application.				OCT 27 2004		
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	12	20	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	1	3	0 x	\$84.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: October 27, 2004			
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			<div style="border: 1px solid black; padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence </div>			
CC:						

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. RTS-0139	
Applicant(s): Baker and Cowsert						
Application No. 10/035,485	Filing Date October 17, 2001	Examiner Janet L. Epps Ford	Customer No. 32862	Group Art Unit 1614	Confirmation No. 5056	
Invention: ANTISENSE MODULATION OF MATRIX METALLOPROTEINASE 1 EXPRESSION						
<u>COMMISSIONER FOR PATENTS:</u>				RECEIVED CENTRAL FAX CENTER OCT 27 2004		
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.</div><div>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</div></div>						
<div style="display: flex; align-items: center;"><div style="flex: 1;"> _____ Signature</div><div style="flex: 1; text-align: right;">Dated: October 27, 2004</div></div>						
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			<div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence</div>			
CC:						

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. RTS-0139
Applicant(s): Baker and Cowser			
Application No. 10/035,485	Filing Date October 17, 2001	Examiner Janet L. Epps Ford	Group Art Unit 1614
Invention: ANTISENSE MODULATION OF MATRIX METALLOPROTEINASE 1 EXPRESSION			
RECEIVED CENTRAL FAX CENTER OCT 27 2004			
I hereby certify that this <u>Reply under 37 C.F.R. 1.111</u> <small>(Identify type of correspondence)</small>			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703872-9306</u>)			
on <u>October 27, 2004</u> <small>(Date)</small>			
<u>Jane Massey Licata</u> <small>(Typed or Printed Name of Person Signing Certificate)</small>			
<u></u> <small>(Signature)</small>			
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OCT 27 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: RTS-0139
Inventors: Baker and Cowser
Serial No.: 10/035,485
Filing Date: October 17, 2001
Examiner: Janet L. Epps Ford
Customer No.: 32862
Group Art Unit: 1635
Confirmation No.: 5056
Title: Antisense Modulation of Matrix
Metalloproteinase 1 Expression

Certificate of Facsimile Transmission

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

On October 27, 2004

Jane Massey Licata
Jane Massey Licata Registration No. 32,257

Assistant Commissioner for Patents
Washington, DC 20231

Reply under 37 C.F.R. § 1.111

This is a reply to the Office Action mailed July 28, 2004 setting a three (3) month statutory period for response. Please enter the following amendments and remarks into the record.

The Amendments to the Claims are reflected in the listing of claims which begins on page 2.

Remarks begin on page 4.